



**DRUG MANAGEMENT FOR  
ECD**  
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**ORLANDO  
HEALTH®**

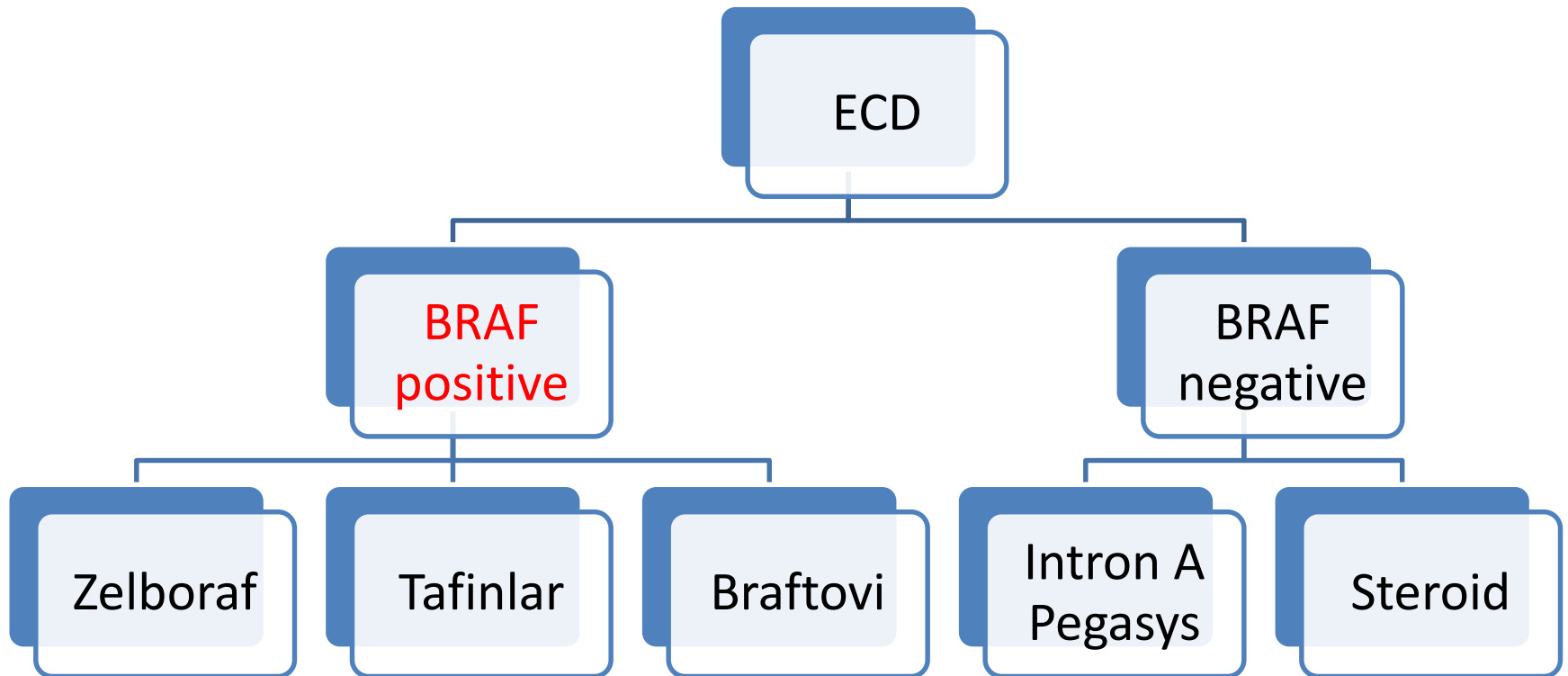
**UFHealth**  
CANCER CENTER

Month Day, Year

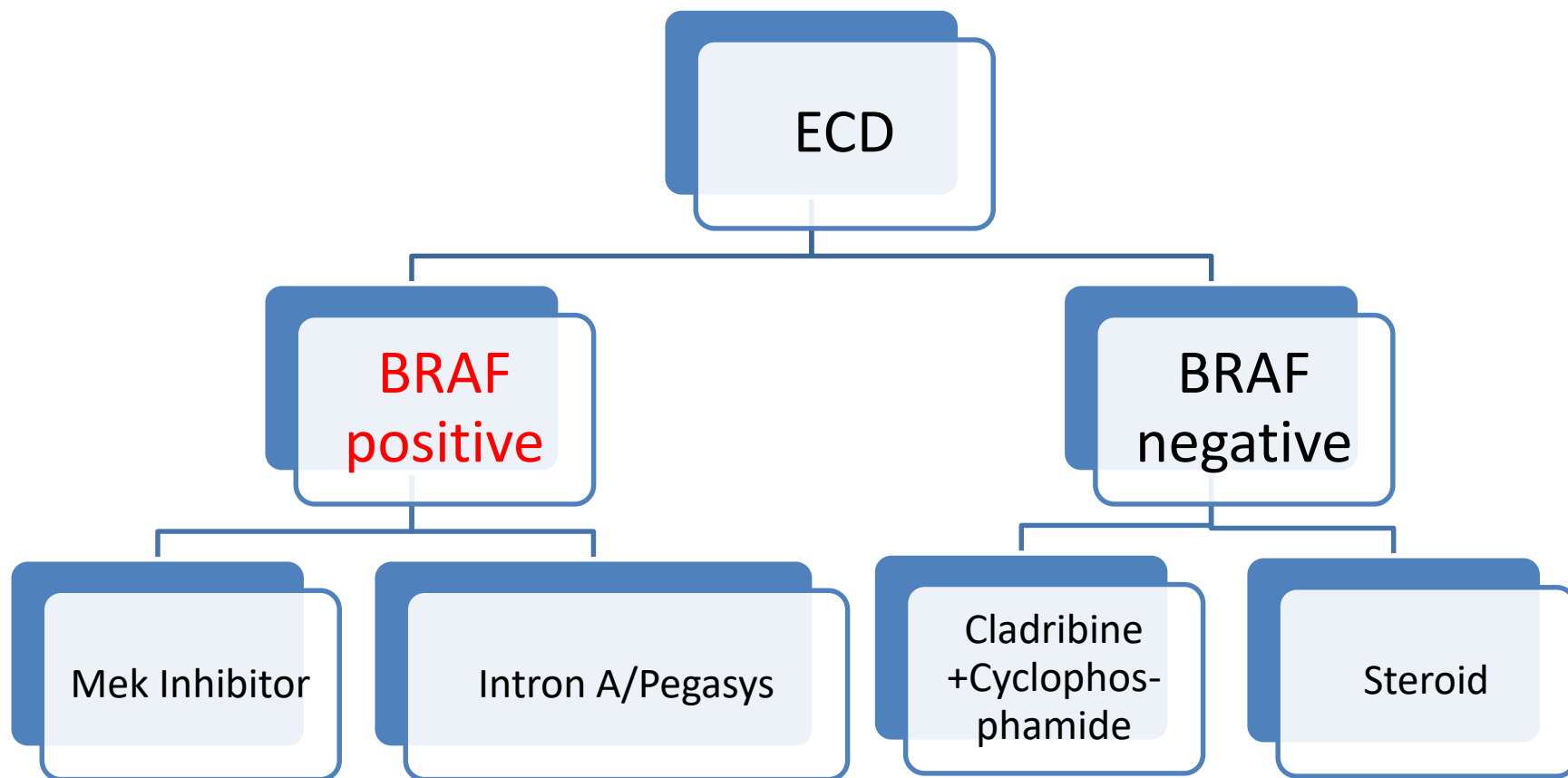
# Disclosure

- I don't have actual or potential conflict of interest in relation to this program/presentation.

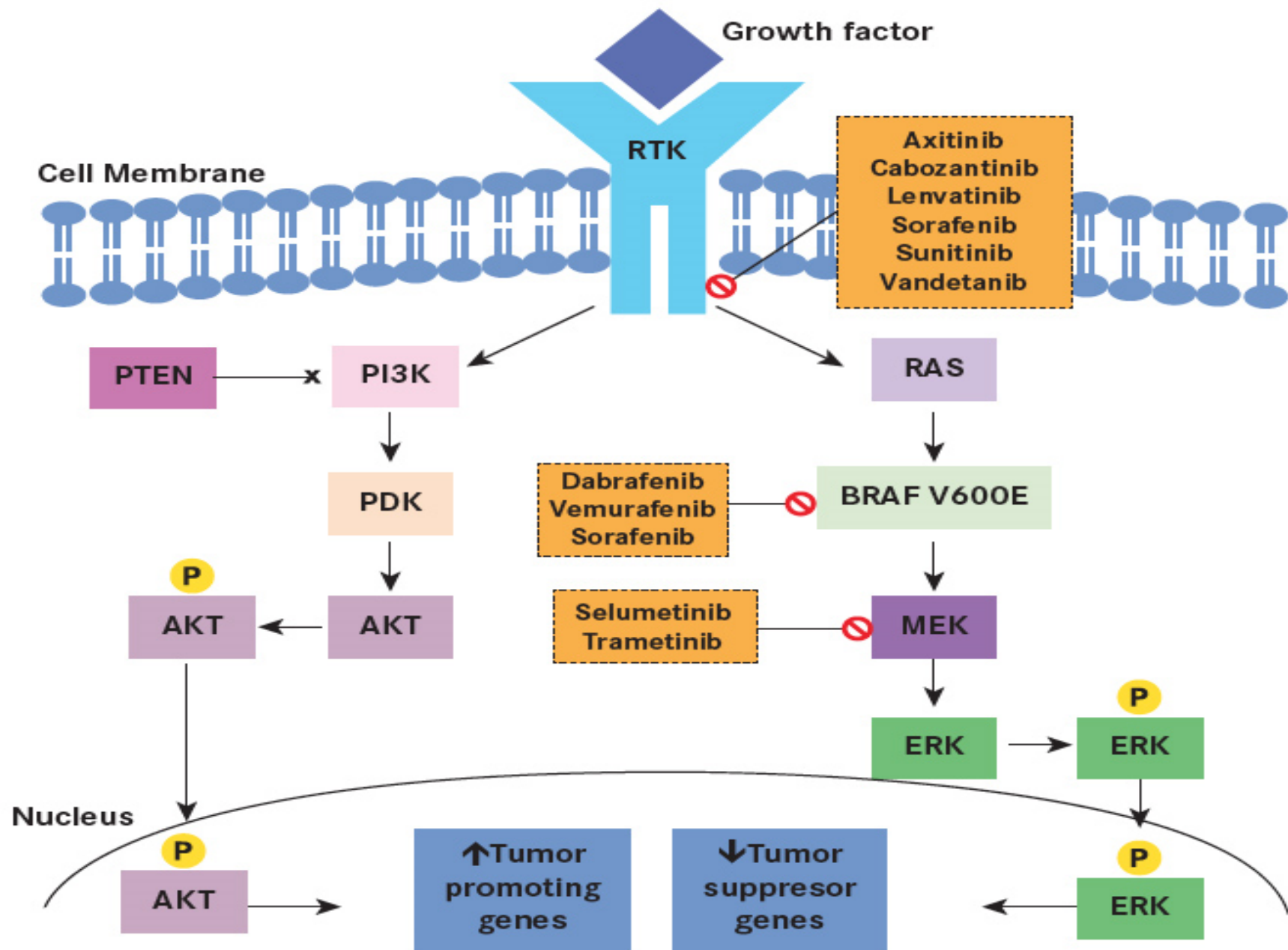
# Initial Treatment for Symptomatic Patients



# Failed or Intolerance to Initial Treatment for Symptomatic Patients



**FIGURE.** Signaling Pathways in Thyroid Cancer



# BRAF Inhibitors

Drugs	<b>Zelboraf<sup>®</sup></b> <b>(Vemurafenib)</b> <b>240mg</b>	<b>Tafinlar<sup>®</sup></b> <b>(Dabrafenib)</b> <b>50mg, 75mg</b>	<b>Braftovi<sup>®</sup></b> <b>(Encorafenib)</b> <b>50mg, 75mg</b>
<b>FDA Approved</b>	Yes	No	No
<b>Dosing/ Administration</b>	<b>480-960mg twice daily</b> <b>(2-4 tabs twice daily)</b> *With or Without food *Nausea medication recommended	<b>75-150mg twice daily</b> <b>(1-3 caps twice daily)</b> *Empty stomach (1 hour before or 2 hours after a meal) *Nausea medication not needed	<b>450mg once daily</b> <b>(6-9 caps daily)</b> *With or without food *Nausea medication is not recommended
<b>Side effects</b>	Maculopapular rash, Cutaneous squamous cell carcinoma, Hair loss, Ocular toxicity (iritis, blurred vision), Hand Foot Syndrome, Photosensitivity, Arthralgia, Arrhythmia, Chills/Fever, Hepatotoxicity, CHF (in combination with Mek Inhibitor)		
	↑↑ Photosensitivity ↑↑ Arrhythmia ↑↑ Nausea	↑↑↑ Fever/Chills ↑↑ CHF incidence	???

# Mek Inhibitors

Drugs	Mekinist <sup>®</sup> (trametinib) 0.5mg, 1mg	Cotellic <sup>®</sup> (cobimetinib) 20mg	Mektovi <sup>®</sup> (binimetinib) 15mg
FDA Approved	No	No	No
Dosing/ Administration	<p><b>2mg once daily</b> (1 tab daily)</p> <p>*Empty stomach (1 hour before or 2 hours after a meal)</p>	<p><b>60mg once daily x21 days every 28 days</b> (3 tabs daily)</p> <p>* With or without food</p>	<p><b>45mg twice daily</b> (3 tabs daily)</p> <p>*With or without food</p>
Side effects	<p>Maculopapular rash, acneiform rash, diarrhea, fatigue, edema, pneumonitis, Ocular As (blurred vision), CHF,</p>		

# Management of BRAF and MEK Inhibitor

Symptoms	Onset/Duration	Treatment
Chills, night sweats, flu-like symptoms, hypotension Tmax=104F	Often occurs in the 1 <sup>st</sup> month.  Median duration: 9 days	Start anti-pyretic ( Tylenol/Motrin) Interrupt treatment Secondary prophylaxis with anti-pyretic Start steroid ( prednisone10mg daily x 4-5 days) Switch agent?  <i>*Treatment may be resumed 24 hrs after symptom resolved.</i>
Skin Rash	Occurs within days of treatment	Emollients, topical steroid Consider oral steroid or antibiotic Interrupt treatment
PPE (Hand-foot Syndrome)	Within days or weeks	Prophylaxis with Udderly Smooth cream Urea Cream



# Maculopapular rash



# Hand-foot syndrome



# Management of BRAF and MEK Inhibitor

Symptoms	Onset/Duration	Treatment
Cutaneous squamous cell	Within days	<ul style="list-style-type: none"> <li>*Add on Mek inhibitor</li> <li>*Refer to dermatologist</li> <li>*Role of Niacinamide????? (Phase 3 ONTRAC)</li> </ul>
Diarrhea	Within days	<ul style="list-style-type: none"> <li>*Keep adequate fluid intake</li> <li>*Immodium</li> <li>*Colestipol???</li> <li>*Interrupted treatment</li> </ul>
Arthralgia	Within days Lasted up to 3 months	<ul style="list-style-type: none"> <li>*Tylenol alternating with NSAID</li> <li>*Steroid</li> <li>*Interrupted treatment</li> </ul>

# Cutaneous squamous cell carcinoma



# Management of BRAF and MEK Inhibitor

Symptoms	Onset/Duration	Treatment
Arrhythmia CHF	Months	* Baseline EKG and baseline ECHO * Correct Magnesium and potassium level Follow PI.
Pneumonitis (cough with shortness of breath)	Weeks	* Interrupted treatment and chest-xray is ordered. * Short course steroid. * Reduced dose of mek inhibitor
Ocular toxicity	Weeks	* Referred to ophthalmologist for an evaluation. * Uveitis- may initiated topical steroid eye drop

# Summary

Do	Don't
<p>Washing hand before and after Apply Sunscreens SPF <math>\geq 30</math></p>	<p>*Don't open the capsules. Take medication as a whole *Store medication in place that temperature may varies</p>
<p>*Always read the labeling *Set alarm on phone or using calendar to ensure that dose is not missed. *Have a thermometer on hand.</p>	<p>*Take additional dose after having vomiting *Eating grapefruit or drinking grapefruit juice</p>
<p>Always check with Pharmacist about copay card and assistance if necessary Always allow pharmacy 7 days for a refill</p>	<p>*Pick up medication with high copay</p>
<p>Stay up to date with Vaccination: <i>Influenza vaccine- inactive version</i> <i>Pneumococcal vaccine- yes</i> <i>Shingles vaccine- Shingrix is preferred</i></p>	<p>*Herbal products or OTC without checking with pharmacist.</p>